

Work Order ID 87284

\*87284\*

Page 1

July-12-12 12:34:27 PM

Item ID: D2071-5

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Cable

Start Date: 7/05/12

Start Qty: 5.00

\*5\*

Cust Item ID:

Required Date: 8/10/12

Req'd Qty: 5.00

\*5\*

Customer:

Reference:

Approvals:

Process Plan: MLJ

Date: 12/07/12 Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start \*NR1\*

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2071	G								

100

0.00

\*100\*

Purchasing

Purchasing

PURCHASING

Memo

0.00

Issue P/O: 17438  
Purchase Part Number: 09-9400-74

\*\*\*ENSURE D2071-5 IS ENTERED AS P/N ALSO\*\*\*

Possible Supplier: WESCON  
Material release note is required

CL 12/07/12 10

110

Receive & Inspect for Damage & Mat'l Certs

0.00

\*110\*

Packaging

Packaging

Memo

0.00

Ensure Material Release Note is attached

CL 12/07/12 10

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

# Work Order ID 87284

**\*87284\***

Page 2

July-12-12 12:34:27 PM

Item ID: D2071-5 Accept: **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Cable  
 Start Date: 7/05/12 Start Qty: 5.00 **\*5\*** Cust Item ID:  
 Required Date: 8/10/12 Req'd Qty: 5.00 **\*5\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 <b>*120*</b> QC Quality Control	QC6- Inspect dimensions to drawing  Memo	0.00 0.00				(X10)			
130 <b>*130*</b> Packaging Packaging	Identify as per dwg & Stock Location: <u>223</u>  Memo	0.00 0.00				10		SL 12/8/30	
140 <b>*140*</b> QC Quality Control	QC21- Final Inspection - Work Order Release  Memo	0.00 0.00							

MF  
12-08-30

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

July-12-12 12:34:26 PM

Page 1

Work Order ID: 87284

Parent Item: D2071-5

Parent Item Name: Cable

Start Date: 7/05/12

Required Date: 8/10/12

Start Qty: 5.00

Required Qty: 5.00

Comments: New issue 12.03.30 LL  
DWG REV.G DD VERF:EC

IPP REV:B 12.04.04 AS PER

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
09-9400-74 Cable		Purchased	No			110	Each	0.0000	1	5			

*PC12/8/29 (10)*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

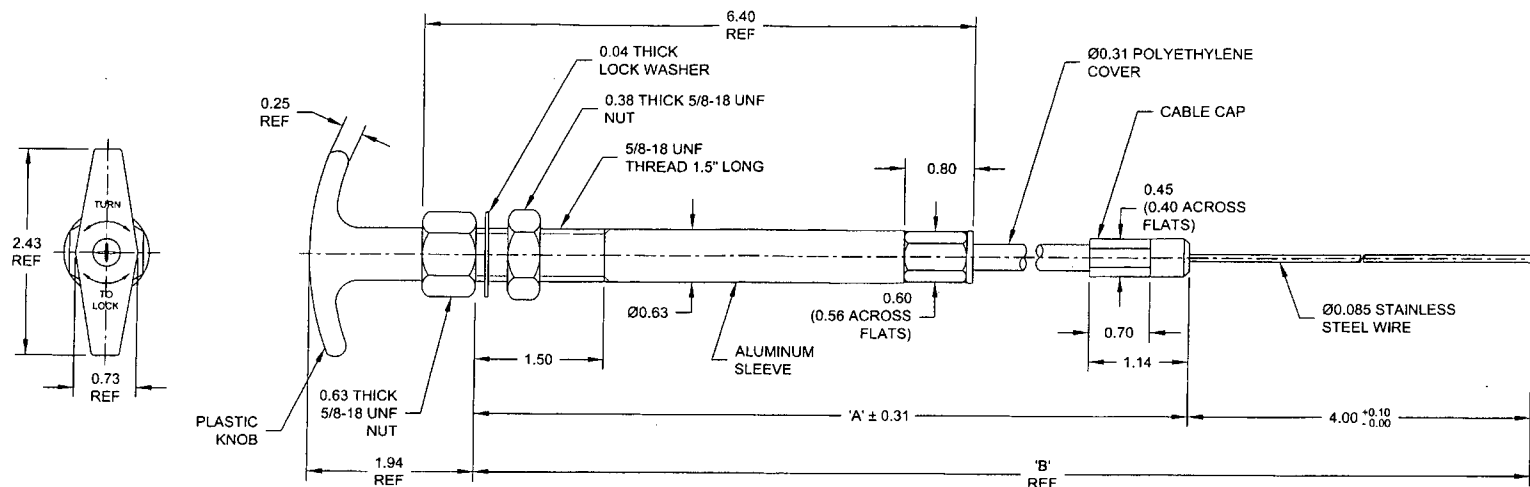
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# SPECIFICATION CONTROL DRAWING



PUSH-PULL CONTROL, TURN TO LOCK, CABLE

DART P/N	LENGTH 'A'	LENGTH 'B' (LENGTH 'A' + 4.00)	SUPPLIER	SUPPLIER P/N	WEIGHT (lbs)
D2071	32.00	36	WESCON	09-9400-69	0.63
D2071-3	38.00	42		09-9400-68	0.68
D2071-5	36.00	40.00		09-9400-74	0.65

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 87284 MLJ  
12/07/12

## NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: PER QSL044 6.1 (FINE POINT-MARKER)
- 7) WEIGHT: PER TABLE

RELEASED  
2012-03-30

G	ADDED -5 (REF PAR 12-163)	AJS	12.03.26
F	UPDATED WESCON P/N'S. PREVIOUS WERE QUOTE P/N'S	MB	11.02.03
E	CHG TO WESCON P/N MB10-334-02/-03. NCR10-383.	MB	11.01.17
D	UPDATED TO CURRENT DRAWING STANDARDS; ADDED P/N D2071-3 (ZN B6-1); REASON: LONGER CABLE REQUIRED FOR MIRRORS INSTALLED ON B407	MB	08.12.04
C	RE-DRAWN	CB	06.10.18
B	CHANGE TO DANCO P/N 56V03-36	-	06.03.10
A	ADD CABLE CRAFT P/N 59V00-3-36	-	97.05.08
REV.	DESCRIPTION	BY	DATE
DESIGN	CB	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED		DRAWING NO.	REV. G
MFG. APPR.		D2071	SHEET 1 OF 1
APPROVED		TITLE	SCALE
DE APPR.		CABLE	NTS
DATE	12.03.26	COPYRIGHT © 1997 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL. AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	







Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO17438**

Purchase Order Date 7/13/12

PO Print Date 7/17/12

Page Number 1 of 1

**Order From :**

VU-WES001

WESCON PRODUCTS COMPANY  
2533 SOTH WEST STREET  
PO BOX 7710  
WICHITA, KANSAS 67277

Contact Name		Buyer	Chantal Lavoie
Vendor Phone	316-942-7266	Requisition Nbr	
Vendor Fax	316 942 5114	Tax Resale Nbr	10127-2607
Vendor Account Nbr		Terms	Net 30
		Currency	USD
		FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

REVISED

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	09-9400-74	Cable	8/31/12 Yes	10.00 Each	FedEx PI collect	\$25.0000	\$250.00

Special Inst: AS PER DWG D2071-5 REV. G  
B87284  
WESCON P/N: 09-9400-74

PO Total: \$250.00

CERTIFICATE OF CONFORMITY  
REQD UPON DELIVERY

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO

Change Nbr: 3

Change Date: 7/17/12



## PACKING SLIP

Page: 1  
Packing Slip: 342499

HD

From:  
WESCON PRODUCTS COMPANY  
2533 S. WEST ST. (CONTROLS)  
2810 S. WEST ST. (PLASTICS)  
WICHITA KS 67217  
(316) 942-7266

Bill To: 41976  
DART AEROSPACE LTD.  
1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
CANADA

Ship To: (1)  
DART AEROSPACE LTD.  
1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
CANADA

## Order Contact:

Pack Date	Order #	Cust PO	Ship Via	Weight	Pkgs #
08/23/12	C316205	PO17438	FEDX CHG ACCT#	10.00	1

Line/Rel	Item	U/M	Qty Ordered	Qty To Pack
1	D2071-5P 09-9400-74 CONTROL REV-0/CR-PG1 C/I: D2071-5P	EA	10.000	10.000

FEDX CHG ACCT# 15179324-0  
ACCOUNTING TO EMAIL INVOICES TO:  
rmolnar@dartaero.com

1 51"mm bx 10 #

Country of Origin  
For The Goods Listed:  
UNITED STATES OF AMERICA



Wescon Products Company  
P.O. Box 7710  
Wichita, KS 67277  
(316) 942-7266  
FAX (316) 942-5114

SN. 8-24

## CERTIFICATE OF CONFORMANCE

Customer: Dart Aerospace LTD  
Customer Part Number: D2071-5P  
Customer Revision: PG1  
Wescon Part Number: 09-9400-74  
Wescon Revision: 0  
Item Description: Control  
Quantity: 10  
Ship Date: 8-23-12  
Purchase Order Number: PO17438  
Lot Number: 316205-001

DA  
1

5176240

I certify that the items listed above have been inspected and tested, and conform to all specifications and requirements detailed in the contract or purchase order, and that inspection and test records are available on file.

Supplier Signature:

C. Johns  
Inspector

Title:

Date:

8/10/2012

